Office of Emergency Medical Services Virginia Department of Health

12VAC-5-31-2860. EMS System Initiative Award Memorandum of Agreement

Please keep a copy of this document for your records.

As a grantee under the terms of the Office of the Emergency Medical Services (OEMS), Financial Assistance for Emergency Medical Services (EMS) Grant Program, EMS System Initiative Award, the undersigned hereby agrees to abide and comply by the following requirements, per Virginia Emergency Medical Services Regulations I2VAC5-3-2860 EMS System Initiative Awards.

1. Responsibilities of the Grantee:

- Grantee shall not discriminate in the provisions of its services or in the conduct of its business affairs on the basis of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by law. By accepting this grant, the grantee certifies to the Commonwealth that they will conform to the provisions of the Federal Civil Rights Act of 1964, as amended, as well as the Virginia Fair Employment Contracting Act of 1975, as amended, where applicable, the Virginians with Disabilities Act, the Americans with Disabilities Act.
- The grantee shall be responsible for ensuring that item(s) purchased in whole or in part with the use of state moneys comply with these regulations.
- Grantee shall be responsible for the preparation and maintenance of proper accounting records that shall be maintained for a period six (6) years from the end of the grant period. These records shall be subject to and available for inspection by this agency, its authorized agents, and/or state auditors shall have full access to and the right to examine any of said materials during said period.
- Grantee shall continue to provide services to the citizens and community served within the Commonwealth that meet the goals and objectives of the Code of Virginia §32.1-111.3 in developing a comprehensive, coordinated, statewide emergency medical care system.
- Grantee shall meet the requirements pursuant to the Code of Virginia §32.1-111.12, "No moneys shall be disbursed directly to any rescue squad or other emergency medical services organization unless such squad or organization operates on a nonprofit basis exclusively for the benefit of the general public."

2. Use of Funds:

- Funds must be used only for the specific items, service, or programs for which they were awarded, including any conditions placed upon a grant award. Should any audit reveal that funds were disbursed for item(s) not awarded funding, the grantee shall be held responsible for repayment, subject to possible enforcement actions under the Virginia Administrative Code or criminal prosecution.
- By signing this "Memorandum of Agreement" form the grantee attests that the award funds will be used as granted and meets all conditions placed upon the award.

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Funds must be used for expenditures or commitments made from July 1-December 31, 2016.

3. Improper Expenditures:

- An audit revealing expenditures not permitted by the conditions of the award will result in the grantee being required to reimburse OEMS on any funds received.
- A grantee providing false, misleading or improper information to OEMS will be ineligible for future grants for a period of five (5) years and may be subject to additional investigation and enforcement by OEMS and/or criminal prosecution.

4. Award Requirements:

• The grantee agrees to provide the services specified in the grant award for the amount specified in the EMS System Initiative Award for the specified course(s) as follows:

| Program Type | Max Reimbursement | |
|------------------------------|-------------------|-----------|
| Emergency Medical Responder | | |
| 12 or more students | \$ | 1,836.00 |
| 7 - 11 students | \$ | 1,224.00 |
| 1 - 6 students | \$ | 765.00 |
| Emergency Medical Technician | | |
| 12 or more students | \$ | 4,284.00 |
| 7 - 11 students | \$ | 2,856.00 |
| 1 - 6 students | \$ | 1,785.00 |
| Advanced EMT | | |
| 12 or more students | \$ | 4,284.00 |
| 7 - 11 students | \$ | 2,856.00 |
| 1 - 6 students | \$ | 1,785.00 |
| Intermediate | | |
| 12 or more students | \$ | 12,240.00 |
| 7 - 11 students | \$ | 8,160.00 |
| 1 - 6 students | \$ | 5,100.00 |
| Paramedic | | |
| 12 or more students | \$ | 24,480.00 |
| 7 - 11 students | \$ | 16,320.00 |
| 1 - 6 students | \$ | 10,200.00 |
| RN to Paramedic | | |
| 12 or more students | \$ | 6,120.00 |
| 7 - 11 students | \$ | 4,080.00 |
| 1 - 6 students | \$ | 2,550.00 |

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Payment for the initial course will be processed based upon the number of students determined by the enrollment process. After OEMS receives the enrollment forms, payment will be made as follows:

| Program Type | | nitial Half |
|------------------------------|----------|-------------|
| Emergency Medical Responder | | |
| 12 or more students | \$ | 918.00 |
| 7 - 11 students | \$ | 612.00 |
| 1 - 6 students | \$ | 382.50 |
| Emergency Medical Technician | | |
| 12 or more students | \$ | 2,142.00 |
| 7 - 11 students | \$ \$ | 1,428.00 |
| 1 - 6 students | \$ | 892.50 |
| Advanced EMT | | |
| 12 or more students | \$ | 2,142.00 |
| 7 - 11 students | \$ | 1,428.00 |
| 1 - 6 students | \$ | 892.50 |
| Intermediate | | |
| 12 or more students | \$ | 6,120.00 |
| 7 - 11 students | \$ | 4,080.00 |
| 1 - 6 students | \$ | 2,550.00 |
| Paramedic | | |
| 12 or more students | \$ | 12,240.00 |
| 7 - 11 students | \$ | 8,160.00 |
| 1 - 6 students | \$ | 5,100.00 |
| RN to Paramedic | | |
| 12 or more students | \$ | 3,060.00 |
| 7 - 11 students | \$ | 2,040.00 |
| 1 - 6 students | \$ | 1,275.00 |

The subsequent (second half) payment(s) shall be established upon receipt of the program's initial CSDR and as certifications for the program's students are verified the grantee shall request a single second half payment per initial certification course awarded within 180 days from each courses end date. The second half payment will be based on the number of students marked incomplete and pass for the program according to the formula below. These students must have received Virginia certification for completing the course of instruction and be affiliated with a Virginia licensed EMS agency at the time they become certified in order for the awardee to be eligible to receive payment for said student.

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| Program Type | | Max Second Half | |
|------------------------------|----------------|--------------------|--|
| Emergency Medical Responder | | | |
| 12 or more students | \$ | 918.00 | |
| 7 - 11 students | \$ \$ \$ | 612.00 | |
| 1 - 6 students | \$ | 382.50 | |
| Emergency Medical Technician | | | |
| 12 or more students | \$ | 2,142.00 | |
| 7 - 11 students | \$ | 1,428.00 | |
| 1 - 6 students | \$ | 892.50 | |
| Advanced EMT | | | |
| 12 or more students | \$ | 2,142.00 | |
| 7 - 11 students | \$ \$ \$ | 1,428.00 | |
| 1 - 6 students | \$ | 892.50 | |
| Intermediate | | | |
| 12 or more students | \$ | 6,120.00 | |
| 7 - 11 students | \$ \$ | 4,080.00 | |
| 1 - 6 students | \$ | 2,550.00 | |
| Paramedic | | | |
| 12 or more students | \$ | 12,240.00 | |
| 7 - 11 students | \$ \$ \$ | 8,160.00 | |
| 1 - 6 students | \$ | 5,100.00 | |
| RN to Paramedic | | | |
| 12 or more students | \$ | 3,060.00 | |
| 7 - 11 students | \$ \$ \$ | 2,040.00 | |
| 1 - 6 students | \$ | 1,275.00 | |

- Any materials produced in whole or in part with state funds, shall contain the following statement: "Funding for this project provided by the Virginia Department of Health, Office of Emergency Medical Services." This includes any advertising for future funded classes under this special initiative.
- OEMS reserves the right to reproduce any funded projects for state-wide use. All copyright and patent rights to all papers, reports, forms, materials, creations, or inventions developed in the performance of awarded state funds shall become the sole property of the Commonwealth. On request, the grantee shall promptly provide an acknowledgment or assignment in a tangible form satisfactory to the Commonwealth to evidence the Commonwealth's sole ownership of specifically identified intellectual property created or developed in the performance of the awarded state funds.

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MEMORANDUM OF AGREEMENT

I, as the Authorized Agent, affirm that the grantee agrees to abide by all items listed in the Memorandum of Agreement, and by signing below attests to this fact.

Any fraudulent submissions for payment (or misrepresentations of any kind) may be considered sufficient cause for grant revocation, repayment and possible prosecution of both the Grantee and the Authorized Agent, whose name appears below.

Furthermore, I acknowledge that specific grant conditions may have been placed upon this grant award and that these conditions must be met in order to receive the grant funds.

| Name of Grantee (Agency) | |
|-------------------------------------|---------------------|
| Name and Title of Authorized Agent | |
| Daytime Phone Number | |
| Email Address (Required) | |
| Signature of Authorized Agent | |
| Federal Identification Number (FIN) | |
| Grant Number | FOR OFFICE USE ONLY |
| Date | |
| | |